



Commissioner for Patents  
Washington, DC 20231  
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Bib Data Sheet

CONFIRMATION NO. 9388

<b>SERIAL NUMBER</b> 09/431,902	<b>FILING DATE</b> 11/02/1999 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2663	<b>ATTORNEY DOCKET NO.</b> FUJY=16.705
<b>APPLICANTS</b> KAZUYUKI OHTSU, KAWASAKI-SHI, JAPAN; HIROKO SUZUKI, KAWASAKI-SHI, JAPAN; MASAYUKI TASHIRO, KAWASAKI-SHI, JAPAN;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 11-041263 02/19/1999				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/30/1999</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 8
				<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 026304				
<b>TITLE</b> GATEWAY APPARATUS				
<b>FILING FEE RECEIVED</b> 916	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

SERIAL NUMBER 09/431,902	FILING DATE 11/02/99	CLASS 370	GROUP ART UNIT 2739	ATTORNEY DOCKET NO. FUJY=16,705
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APPLICANT

KAZUYUKI OHTSU, KAWASAKI-SHI, JAPAN; HIROKO SUZUKI, KAWASAKI-SHI, JAPAN;  
MASAYUKI TASHIRO, KAWASAKI-SHI, JAPAN.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

DW

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

DW

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED JAPAN

11-041263

02/19/99

DW

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/30/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JPX	SHEETS DRAWING 6	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 5
Verified and Acknowledged <u>DW</u> Examiner's Initials _____			Initials _____			

ADDRESS	HELFGOTT & KARAS PC EMPIRE STATE BUILDING 60TH FLOOR NEW YORK NY 10118
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TITLE	GATEWAY APPARATUS
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FILING FEE RECEIVED  \$916	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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